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Bulletin No. 3 March 19, 1982 Policy Update on School and Day Care Immunization Requirements

1. Diphtheria-Tetanus-Pertussis (DPT) and Trivalent Oral Polio Vaccine (TOPV)

The USPHS Advisory Committee on Immunization Practices recently issued revised recommendations on diphtheria, tetanus, and pertussis immunization. These new recommendations remain consistent with the American Academy of Pediatrics' recommendations. However, the ACIP has added a statement concerning the timing of the DTPbooster:

Children four through six years (up to seventh birthday) who receive 4 doses before their fourth birthday should receive a single dose of DTP just before entering kindergarten or elementary school. This booster dose is not necessary if the 4th dose was given after the fourth birthday.

In the absence of such a statement in the past, the Division of Public Health established a policy that children who received their 4th DTP after the third birthday were sufficiently immunized with DTP to be considered in compliance with the State's school and day care immunization regulations. This policy is hereby rescinded and replaced by the ACIP's recommended fourth birthday criteria. Similarly, children who have received the 3rd dose of TOPV after their fourth birthday shall be considered sufficiently immunized against polio and in compliance with the school and day care regulations. Please note that having 5 or more DTP doses and/or 4 or more TOPV doses before the fourth birthday does not eliminate the necessity of school entry boosters.

Related to the issue discussed above is the policy on the deadline for obtaining the 5th DTP and the 4th TOPV (when they are needed) to be in compliance with school and day care immunization regulations. This policy is as follows:

Children who had their 4th DTP and 3rd TOPV prior to the fourth birthday must have DTP and TOPV boosters upon attaining their fifth birthday or upon entering kindergarten, whichever occurs first.

2. Measles and Rubella

Since 1977 it has been Division of Public Health policy to revaccinate children vaccinated for measles before their first birthday. This has also been the policy for rubella immunization. The Division of Public Health's immunizations policies are utilized by the Division of Family and Youth Services and the Department of Education as the criteria for immunization compliance in day care centers and Therefore children whose measles and/or rubella vaccinations were given prior to their first birthday are not in compliance. They must be revaccinated or they are subject to exclusion (except that rubella is not mandatory after the twelfth birthday).

Recent reviews of school immunization records revealed measles and rubella vaccinations for which the recorded dates failed to indicate whether the vaccinations were after the first birthday. It was common to find only the month and year recorded, but in many cases the day of vaccination is needed to determine compliance. It is important that school and day care records show complete vaccination dates in order for proper compliance determinations to be made.

NATIONAL EFFORT TO ELIMINATE MEASLES IS SUCCEEDING

In 1978 a nationwide program was launched to eliminate indigenous measles from the U.S. by October 1982. Reported measles reached a record low in 1981. Only 3,032 cases were reported. This is a 77.6% reduction from the 1980 total of 13,506 and a 99.4% reduction from the prevaccine era when reported cases averaged over 525,000 annually. Only 44 cases were reported nationwide for the first four weeks of 1982 compared to 90 cases during the same four weeks in 1981. MEASLES ELIMINATION HAS ALREADY BEEN ACHIEVED IN ALASKA. No confirmed cases were reported in 1981.

Because of the role schools play in measles transmission, strict enforcement of school requirements has been an essential factor in the reduction of measles in Alaska and nationwide. A strong statistical association between low measles incidence and rigorously enforced comprehensive school laws has been clearly demonstrated. School officials, day care center operators, health providers, health authorities, and parents who made this monumental effort successful can take great pride in this achievement! The challenge to maintain what has been achieved lies ahead. We count on your continued support.